Case 16-20064 Doc 1 Fill in this information to identify your case:		Intered 06/20/16 12:52:09 age 1 of 65	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under:		
	Chapter 7		
	Chapter 11 Chapter 12		—
	Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name	Stanley		
	Write the name that is on	First name	First name	
	your government-issued picture identification (for example, your driver's	Middle name Carter	Middle name	
	license or passport	Last name	Last name	
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
2.	All other names you			
	have used in the last	First name	First name	
	8 years			
	Include your married or maiden names.	Middle name	Middle name	
	madernames.	Last name	Last name	
		First name	First name	
		Middle name	Middle name	
		Last name	Last name	
3.	Only the last 4 digits of your Social	XXX - XX- 6191	xxx - xx-	
	Security number or	OR	OR	
	federal Individual Taxpayer	9 xx - xx-	9 xx - xx-	
	Identification number (ITIN)			

Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 (1/2):52:09 Desc Main Debtor 1 Page 2 of 65 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 1510 Garden Place Number Street Number Street 60085 Waukegan Illinois City State Zip Code City State Zip Code Lake County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 (1/22/52:09 Desc Main

Document Document Page 3 of 65 Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ₩ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

Stanley Case 16-20064 Doc 1 Filed 06¢2/9/16 Entered 06/20/16 (142:52:09 Desc Main Debtor 1 Page 4 of 65 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent

repairs?

State

City

Zip Code

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t Name Middle Name

me Document

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Active duty.

counseling with the court.

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of completion. completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment plan, if any. plan, if any. I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required you to file this case. you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. My physical disability causes me to be Disability. Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to

Active duty.

counseling with the court.

I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 (12:52:09 Desc Main Debtor 1 Page 6 of 65 Document of the Document of th **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Stanley Carter Signature of Debtor 2 Signature of Debtor 1 Executed on <u>6/20/2016</u> Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 (1/20/52:09 Desc Main Documents) Page 7 of 65

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Nathan Delman		Date	6/20/2016	
Signature of Attorney for Debtor		Date	MM / DD / YYY	/Υ
Nathan Delman				
Printed name				
Semrad Law Firm				
Firm name				
5101 Washington Street				
Street				
Unit 29				
Gurnee	Illinois			60031
City	State			Zip Code
Contact phone			Email address	ndelman@semradlaw.co
				doiman © oom addaw.
Bar number			State	

<u>Doc 1 Filed 06/20/16 Entered 06/2</u>0/16 12:52:09 Desc Main Fill in this information to identify your case: Debtor 1 Stanley Carter First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$5,510.00 1b. Copy line 62, Total personal property, from Schedule A/B \$5,510.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$7,408.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$12,748,11 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$20,156.11 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$1,264.79 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,260.00

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Par	Answer These Questions for Administrative and Statistical Records							
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.							
	✓ Yes.							
7. V	Vhat kind of debt do you have?							
'	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual prir family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C.							
,	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.							
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,694.94 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.							
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
	From Part 4 on Schedule E/F, copy the following:	Total claim						
	9a. Domestic support obligations (Copy line 6a.)	\$0.00						
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)							
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy line 6f.)	\$0.00						
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)							
		\$0.00						

\$0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

	Case 16-20064	Doc 1	Filed 06/20/16	Entered 06/20/16	12:52:09	Desc Main
Fill in this	information to identify your case:					
Debtor 1	Stanley		Carte	r		
	First Name	Middle N	Name Last N	lame		
Debtor 2 (Spouse, i	if filing) First Name	Middle N	Name Last N	Name		
United Sta	ates Bankruptcy Court for the:	Northern	District of II			
Case num (If known)	nber		(State)		
Officia	al Form 106A/B					Check if this is an amended filing
Sched	dule A/B: Prope	rty				12/1
esponsib vrite your Part 1:	where you think it fits best. Be le for supplying correct inform name and case number (if kno Describe Each Residend I own or have any legal or equ	mation. If more spown). Answer eve ce, Building, L	pace is needed, attach ery question. _and, or Other Rea	a separate sheet to this form	m. On the top of a	any additional pages,
✓	No. Go to Part 2					
	Yes. Where is the property?					
1.1	Street address, if available, or o	other description	What is the property Single-family home)	the amount of ar	ecured claims or exemptions. Put ny secured claims on Schedule D: Have Claims Secured by Property.
	Otroct address, if available, or c	arier description	Duplex or multi-un	· ·	Current value	, , , , , , , , , , , , , , , , , , ,
			Condominium or co	•	entire property	
			Land	oblie nome		_
	Number Street		Investment property	/		ature of your ownership
			Timeshare		interest (such a	as fee simple, tenancy by or a life estate), if known.
	City State	Zip Code	Other			
			Debtor 1 only Debtor 2 only Debtor 1 and Debtor	in the property? Check one. or 2 only debtors and another	Check if the (see instru	nis is community property actions)
				u wish to add about this ite	m. such as local	
lf	ann an hanna manna than ann a liat h		property identification			
ir you c	own or have more than one, list he	ere:	What is the property	? Check all that apply.	Do not deduct s	ecured claims or exemptions. Put
1.2	Street address, if available, or o	other description	Single-family home	• • •	the amount of ar	ny secured claims on Schedule D: Have Claims Secured by Property.
	Street address, ii available, or c	otilei description	Duplex or multi-un Condominium or co	•	Current value entire property	of the Current value of the
			Manufactured or m	obile home		
	Number Street		Investment property	/	Describe the n	ature of your ownership
			Timeshare			as fee simple, tenancy by or a life estate), if known.
	City State	Zip Code	Other			
			Debtor 1 only	in the property? Check one.	Check if the (see instru	nis is community property actions)
			Debtor 2 only	or O only		
			Debtor 1 and Debt	or 2 only debtors and another		
			At least one of the t	acbiolo al lu al IUII IEI		

Other information you wish to add about this item, such as local property identification number:

Debtor 1	Stanley Case 16-200	64 Doc 1 F	Filed 06/20/16 Entered 06/20/16	#42.09 D€	esc Main
1.3Stree	et address, if available, or oth	wi	Docume Page 11 of 65 hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any seco	I claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
		Cti	ho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about this item, soperty identification number:	(see instruction	community property s)
you ha		ion you own for all o	of your entries from Part 1, including any entries fo		
Do you ov you own th 3. Cars, va	vn, lease, or have legal or e at someone else drives. If you ans, trucks, tractors, sport utilit	quitable interest in a llease a vehicle, also re	any vehicles, whether they are registered or not? In eport it on Schedule G: Executory Contracts and Unexpes		
✓ Ye 3.1	Make Model: Year: Approximate mileage: Other information:	Nissan Maxima 2006 100000	Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? §4000.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?

Debtor 1	Stanley Case 16-20064 Doc 1	Filed 06/20/16 Entered 06/20/16	6∂∂14626652: <u>09 Des</u>	c Main
	First Name Middle Name	Document Page 12 of 65		
3.3	Make Model:	Who has an interest in the property? Check one.	Do not deduct secured cl the amount of any secure	
	Year:	Debtor 1 only	•	ims Secured by Property.
	Approximate mileage:		ordanoro mino maro dia	mie Goddied by Freporty.
	·· <u> </u>	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
3.4		Who has an interest in the property? Check	Do not deduct secured cl	•
	Model:	one.	the amount of any secure	
	Year: Approximate mileage:	Debtor 1 only	Creditors Wild Have Cla	ims Secured by Property.
	Approximate mileage.	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
4.1	Yes Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put
4.1		Who has an interest in the property? Check	Do not deduct secured cl	·
	Model: Year:	one. Debtor 1 only	the amount of any secure	ims Secured by Property.
	Approximate mileage:		Orcanois vino Have Ola	iins occured by 1 toporty.
		Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	•
	Model:	one.	the amount of any secure	
	Year: Approximate mileage:	Debtor 1 only	Creditors who have Cia	ims Secured by Property.
	Approximate mileage.	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	Our citt value of the
	Guior innonnation.	Bobioi 1 dila Bobioi 2 diliy		portion you own?
		At least one of the debtors and another		
	I the dollar value of the portion you own for a	At least one of the debtors and another Check if this is community property (see		

Debtor 1 Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 (1/22/52:09 Desc Main First Name Document Page 13 of 65

Describe Your Personal and Household Items

D	o you own or ha	ve any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	. Household goods	and furnishings	
	Examples: Major appl	iances, furniture, linens, china, kitchenware	
	No		
✓	Yes. Describe	Used Furniture	\$750.00
	. Electronics		
	Examples: Televisions	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
Ш	No		
✓	Yes. Describe	Television	\$100.00
		ue und figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles	
✓	No		
	Yes. Describe		
		orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments	
✓	No		
	Yes. Describe		
	O. Firearms Examples: Pistols, rifle No Yes. Describe	es, shotguns, ammunition, and related equipment	
Н	res. Describe		
	1. Clothes Examples: Everyday o	clothes, furs, leather coats, designer wear, shoes, accessories	
✓	Yes. Describe	Used Clothing	\$350.00
			·
	2. Jewelry Examples: Everyday je gold, silve	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, r	
$\overline{\mathbf{V}}$	No		
	Yes. Describe		
	3. Non-farm animals Examples: Dogs, cats		
	No	, onac, norocc	
Ľ			
	Yes. Describe		
	4. Any other person No	al and household items you did not already list, including any health aids you did not list	
F	Yes. Describe		
		ue of all of your entries from Part 3, including any entries for pages you have attached number here	\$1200.00

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Describe Your Financial Assets

Do	you own or have a	ny legal or equitable inte	rest in any of the following	; ?	portion you own? Do not deduct secured claims or exemptions.
	☑ No	in your wallet, in your home, in a sa	afe deposit box, and on hand when yo	ou file your petition Cash:	
17.		=	certificates of deposit; shares in credunts with the same institution, list eac	_	
	☐ No ✓ Yes		Institution name:		
		17.1. Checking account:			
		17.2. Checking account:			
		17.3. Savings account:	Baxter Credit Union		\$10.00
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		or publicly traded stocks vestment accounts with brokerage	firms, money market accounts		
	✓ No ☐ Yes	Institution or issuer name:			
19.	an LLC, partnership, a		ed and unincorporated business	es, including an interest in	
	Yes. Give specific information about them	Name of entity		% of ownership:	
	2.2				

Deb	tor 1 Stanley Case 16		ed 06/2/6/16	Entered Company Company	(209 Desci)	<u>viain </u>
	First Name			Page 15 of 65		
20.		orate bonds and other negotial				
		nclude personal checks, cashiers' on the are those you cannot transfer to				
	✓ No	,	, ,	,		
	Yes. Give specific					
	information about	Issuer name:				
	them					
					·	
24	Detiroment or nencien					
21.		RA, ERISA, Keogh, 401(k), 403(b),	thrift savings accoun	ts, or other pension or profit-shar	ing plans	
	✓ No					
	Yes. List each	Type of account:	Institution name:			
	account separately.	401(k) or similar plan:				
		Pension plan:				
		IRA:				
		Retirement account:				
		Keogh:				
		Additional account:				
22.	Security deposits and p	Additional account:	-			
22.		deposits you have made so that you	ı may continue service	e or use from a company		
		with landlords, prepaid rent, public	utilities (electric, gas,	water), telecommunications		
	companies, or others					
			Institution name:			
	✓ Yes	Electric:				
		Gas:				
		Heating oil:				
		Security deposit on rental unit:	Elizabeth Anderso	n	\$300.00	
		Prepaid rent:				
		Telephone:				
		Water:				
		Rented furniture:				
		Other:				
23	Annuities (A contract for	r a periodic payment of money to yo	ou either for life or for	a number of years)		
20.	✓ No	a periodic payment of money to ye	ou, chiler for the or for	a namber of years)		
	Yes	Issuer name and description:				

Debte	or 1	StanleyCa First Name	ase 1	6-20064	Doc 1		06/20/16 cumente			6/142452: <u>09</u>	Des	sc Main
24.				ition IRA, in a), 529A(b), and		a qualifie	d ABLE progra	m, or unde	r a qualified sta	te tuition program.		
		No Yes	Institution	on name and d	escription. Sep	parately file	the records of a	ny interests	.11 U.S.C. § 521((c):		
25.	ехе	sts, equita rcisable fo No Yes. Desc	r your I		ts in property	(other th	an anything lis	ted in line	1), and rights or	powers		
26.	Еха	ents, copy	rights, rnet don				r intellectual pro yalties and licens		nents			
27.	Еха	enses, frar	n chises ding per	, and other ge mits, exclusive			ssociation holdin	gs, liquor li	censes, professio	nal licenses		
Mon	iey (or prope	erty ov	ved to you'	?						po Do	rrent value of the ortion you own? not deduct secured ms or exemptions.
28.	✓	Yes. Give s about you a	pecific in them, ir Iready fil		er					Federal: State: Local:	-	
	Exan	ily suppor nples: Past No		ump sum alimo	ny, spousal su	oport, child	l support, mainte	nance, divo	rce settlement, pro		-	
	Ħ		pecific i	nformation						Alimony: Maintenance: Support: Divorce settlement Property settlemen	-	
	Exan	<i>nples:</i> Unpa	aid wage al Secur	one owes you es, disability ins ity benefits; un	urance payme			pay, vacatio	n pay, workers' co	mpensation,	_	

Debt	tor 1	StanleyCase 16 First Name	6-20064	Doc 1 Middle Name	Filed 06¢20/16 Document	Entered 06/20/0	1.6 /11.2.52: <u>09</u> D	esc Main
31.		rests in insurance mples: Health, disabi		rance; health		edit, homeowner's, or rente	r's insurance	
		No Yes. Name the insur of each policy and lis			Company name:		Beneficiary:	Surrender or refund value:
32.	If you		of a living trust		meone who has died beeds from a life insurance p	policy, or are currently entitle	d to receive	
33.	Exar	mples: Accidents, em			I have filed a lawsuit or made claims, or rights to sue	ade a demand for payme	nt	
34.	_	Yes. Describe er contingent and	unliquidated	claims of ev	very nature, including co	unterclaims of the debtor	and rights	
	✓	et off claims No Yes. Describe					-	
35.	✓	financial assets yo No Yes. Describe	u did not alre	ady list				
36.			-			es for pages you have att		\$310.00
Part	5:	Describe Any B	usiness-R	elated Pro	perty You Own or Ha	ave an Interest In. Li:	st any real estate i	n Part 1.
37.	Do y	ou own or have an	y legal or equ	uitable intere	est in any business-relate	d property?		
	✓	No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	✓	ounts receivable or No Yes. Describe	commissions	s you alread	y earned			
39.		ce equipment, furn			odems, printers, copiers, fa	x machines, rugs, telephone	es, desks, chairs, electron	ic devices
		No Yes. Describe						

		First Name		Doc 1	Filed 06/20/16 Document	Page 18 of 65	166/1112/152: <u>09</u> D	esc Main
40.	Mac	hinery, fixtures, eq	uipment, sup	plies you us	se in business, and tools	of your trade		
	✓	No						
		Yes. Describe						
41.	Inve	entory						
	✓	No						
		Yes. Describe						
42.	Inte	rests in partnershi	ps or joint ve	entures				1
	✓	No						
		Yes. Give specific			Name of entity:		% of ownership:	
		information about						
		them						
								<u> </u>
43 (Susta	omer lists, mailing	lists or other	r compilatio	ns		-	_
.0.		_		Compilatio				
			dudo porcopol	lly identifiable	e information (as defined in	11		
	ш		sidde personal	ily identifiable	illionnation (as defined in	11 0.0.0. § 101(4177)):		
		☐ No						
		Yes. Descri	ibe					
44.	Any	business-related p	roperty you	did not alrea	dy list			
	~	No						
	=	Yes. Give specific						
		information						
			-			for pages you have attach		
Part	6:	Describe Any F	arm- and (interest in farm	Commerci mland, list it in	al Fishing-Related P	roperty You Own or I	lave an Interest In	
46.	Do	you own or have a	ny legal or eq	uitable inter	rest in any farm- or comm	ercial fishing-related prop	erty?	
		No. Go to Part 7.						Current value of the
	Ħ	Yes. Go to line 47.						portion you own? Do not deduct secured
								claims
4-	_							or exemptions
47.		m animals <i>mpl</i> es: Livestock, pou	ultrv. farm-raise	ed fish				
	_		,,					
	넴	No Voc Doccribo						1
	Ш	Yes. Describe						

Deb				Walli
48.	Crops-either growing or harvested	mënt ^{me} Page 19	01 05	
	✓ No			
	Yes. Describe		_	
49.	Farm and fishing equipment, implements, machinery, fixture	s and tools of trade		
10.	No	s, and tools of trade		
	Yes. Describe			
50.	Farm and fishing supplies, chemicals, and feed			
	✓ No Yes. Describe			
	ics. Describe			
51.	Any farm- and commercial fishing-related property you did no	ot already list		
	☑ No			
	Yes. Describe		-	
52 A	add the dollar value of all of your entries from Part 6, including	any entries for pages vo	u have attached	
	art 6. Write that number here			
Dor	Decaribe All Drenewty Vey Own or Heye on Inte	areat in That You Did	I Net I ist Above	
Pari 53.			I NOT LIST ADOVE	
	Examples: Season tickets, country club membership			
	✓ No			
	Yes. Give specific information			
	Internation			
54. A	dd the dollar value of all of your entries from Part 7. Write that	number here	>	
Par	18: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2		>	
56.	part 2 total vehicles, line 5	# 4000.00		
	Part 3: Total personal and household items, line 15	\$4000.00		
	Part 4: Total financial assets, line 36	\$1200.00		
		\$310.00		
	Part 5: Total forms and fishing soluted property, line 45			
	Part 6: Total farm- and fishing-related property, line 52			
	Part 7: Total other property not listed, line 54			
62.	Total personal property. Add lines 56 through 61	\$5510.00	Convenersors	+ \$5510.00
			Copy personal property total ▶	
62.7	Fotal of all property on Schodulo A/R Add line 55 Lline 62			\$5510.00

		Case 16-20064	Doc 1 Filed 06/	20/16 Entered 06/	20/16 12:52:09	Desc Main
Fill	in this inform	ation to identify your case:		Ų		
Deb	otor 1	Stanley		Carter		
		First Name	Middle Name	Last Name		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name		
Unit	ted States Ba	nkruptcy Court for the:	Northern E	District of Illinois (State)		
	se number nown)			(Ciate)		
Of	ficial F	orm 106C			_	Check if this is a amended filing
Sc	hedule	C: The Prop	erty You Claim	as Exempt		12/1
For is to exe rece exe pro	each item o state a s mpted up eive certa mption of perty is d t1: Ident Which set	n of property you cla pecific dollar amour to the amount of an in benefits, and tax- 100% of fair market etermined to exceed ify the Property You of exemptions are you cl e claiming state and federal e claiming federal exemptio	t as exempt. Alternative y applicable statutory exempt retirement fundation value under a law that that amount, your executaring? Check one only, even nonbankruptcy exemptions. 11 u.s.c. § 522(b)(2)	st specify the amount of rely, you may claim the f limit. Some exemptions ds—may be unlimited in a limits the exemption to emption would be limited in if your spouse is filing with you	ull fair market value—such as those for dollar amount. How a particular dollar I to the applicable s	r health aids, rights to wever, if you claim an amount and the value of the
		ription of the property an lle A/B that lists this prop	d line Current value of erty the portion you own	Amount of the exemption your Check only one box for each each		cific laws that allow exemption
			Copy the value from Schedule A/B			
	Brief					735 ILCS 5/12-1001(b)
	description	Used Furniture	\$750.00	\$750.00		70012000,12 1001(8)
	Line from Schedule A	/B: <u>06</u>		100% of fair market value, applicable statutory limit	_	
	Brief			applicatio statutory illini		735 ILCS 5/12-1001(a)
	description	Used Clothing	\$350.00	\$350.00)	
	Line from Schedule A	/B: <u>11</u>		100% of fair market value, applicable statutory limit	up to any	
3.	(Subject to	adjustment on 4/01/19 and		5? es filed on or after the date of adju n 1,215 days before you filed this o	,	

Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$300.00 **✓** Elizabeth Anderson description: \$300.00 Line from 100% of fair market value, up to any Schedule A/B: 22 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$100.00 \checkmark Television description: \$100.00 Line from 100% of fair market value, up to any Schedule A/B: 07

applicable statutory limit

		Case 16-20064	Doc 1 Filed (06/20/16 Entered 06/20	/16 12:52:09	Desc Main	
Fill in	this informa	ation to identify your case:		<u> </u>	10 12.02.00	Desc Main	
Debto	or 1	Stanley		Carter			
		First Name	Middle Name	Last Name			
Debto							
(Spou	ıse, if filing)	First Name	Middle Name	Last Name			
Unite	d States Ba	nkruptcy Court for the: No	orthern	District of Illinois			
				(State)			
Case (If kno	number wn)						
Offi	icial F	orm 106D					eck if this is a
			re Who Hay	ve Claims Secured	by Propo		ended filing
							12/1
	-	-		rried people are filing together	•	•	
				he Additional Page, fill it out,		es, and attach it to	o this
		-		name and case number (if known	own).		
1. I	→ '	ditors have claims secured					
ļ			•	r other schedules. You have nothing else	to report on this form.		
	✓ Yes. Fi	Il in all of the information belo	W.				
Part 1	List A	All Secured Claims					
				claim, list the creditor separately for each	Column A	Column B	Column C
		e than one creditor has a par the claims in alphabetical or	· ·	er creditors in Part 2. As much as	Amount of claim	Value of collateral	Unsecured
P	ossibie, list	. the claims in alphabetical or	del according to the cre	uitoi s name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 E	BAXTER CI	REDIT UNION			\$7,408.00	\$4,000.00	\$3,408.00
<u> </u>	Creditor's Na	me	Describe the propert	y that secures the claim:	ψ1,100.00	Ψ 1,000.00	40,100.00
<u> </u>	340 N Milwa Number	Street	060 Automobile				
_				e, the claim is: Check all that apply.			
V	/ernon Hill	s Illinois 60061	Contingent				
_	City	State ZIP Code the debt? Check one.	Unliquidated				
Ī	Debtor		Disputed				
Ì	Debtor 2	•	Nature of lien. Check				
Ì		1 and Debtor 2 only	An agreement you car loan)	ı made (such as mortgage or secured			
	At least another	one of the debtors and	Statutory lien (suc	h as tax lien, mechanic's lien)			
Г		if this claim relates to a	Judgment lien fror	n a lawsuit			
_	ommu commu	ınity debt	Other (including a	right to offset)			
L	vate debt w	vas incurred <u>7/1/2013</u>	Last 4 digits of acco	unt number 0102			
	-	Add the dollar value of you	ır entries in Column A	on this page. Write that number	\$7,408.00		

here:

Fill in		Case 16-2006		06/20/16 Entered 06	6/20/16 12:52:09	Desc	Main	
	1 1115 11 110111116	allori to identity your case	c .					
Debt		Stanley		Carter	_			
		First Name	Middle Name	Last Name				
Debt		E'(No	NAC J. H N	LastNlassa	=			
(Spot	use, if filing)	First Name	Middle Name	Last Name				
Unite	ed States Bar	nkruptcy Court for the:	Northern	District of Illinois				
		.,.,		(State)	_			
Case (If knd	number				=			
`	,	1005/5				Chast	le if this is on	omended filing
Offi	icial Fo	orm 106E/F				Chec	k II triis is an	amended filing
<u>S</u> c	hadu	lo F/F· Cro	ditors Who k	Have Unsecure	d Claims			10/15
	IICau		ditors writer	lave onsecure	d Claims			12/15
				sult in a claim. Also list executo	ory contracts on Schedule	A/B: Prope	erty (Official	Form
the bo	ted in Sche exes on the	edule D: Creditors Wh left. Attach the Conti	no Hold Claims Secured by	Leases (Official Form 106G). Do Property. If more space is need On the top of any additional pa	led, copy the Part you nee	d, fill it out,	number the	claims that e entries in
the bo	téd in <i>Sche</i> oxes on the 1: List A	edule D: Creditors Whe left. Attach the Continual of Your PRIORIT	o Hold Claims Secured by nuation Page to this page. IY Unsecured Claims	Property. If more space is need On the top of any additional pa	led, copy the Part you nee	d, fill it out,	number the	claims that e entries in
the bo	ted in Sche oxes on the 1: List A Do any cree	edule D: Creditors Wh left. Attach the Conti II of Your PRIORIT ditors have priority un	no Hold Claims Secured by nuation Page to this page.	Property. If more space is need On the top of any additional pa	led, copy the Part you nee	d, fill it out,	number the	claims that e entries in
the bo	tied in Sche oxes on the 1: List A Do any cree	edule D: Creditors Whe left. Attach the Continual of Your PRIORIT	o Hold Claims Secured by nuation Page to this page. IY Unsecured Claims	Property. If more space is need On the top of any additional pa	led, copy the Part you nee	d, fill it out,	number the	claims that e entries in
Part 1.	tried in Scheen coxes on the List A Do any cree No. Go Yes.	edule D: Creditors Who left. Attach the Continuity of Your PRIORIT ditors have priority un to Part 2.	io Hold Claims Secured by nuation Page to this page. FY Unsecured Claims nsecured claims against you	Property. If more space is need On the top of any additional pa	led, copy the Part you nee ges, write your name and	d, fill it out, case numb	number the	claims that e entries in n).
Part 1.	ted in Sche text on the text on the text on the text on the text of yes. List all of yes.	edule D: Creditors Who left. Attach the Continuity of Your PRIORIT ditors have priority un to Part 2.	no Hold Claims Secured by nuation Page to this page. TY Unsecured Claims assecured claims against you do claims. If a creditor has more	Property. If more space is need On the top of any additional pa	ded, copy the Part you need ges, write your name and	d, fill it out, case numb	number the per (if known	claims that e entries in n).
Part 1.	ted in Sche bxes on the List A Do any cree No. Go Yes. List all of ye identify what possible, list	edule D: Creditors Who left. Attach the Continuity of Your PRIORIT ditors have priority un to Part 2. Our priority unsecured type of claim it is. If a claims in alphabetic	no Hold Claims Secured by nuation Page to this page. IY Unsecured Claims against you declaims. If a creditor has more laim has both priority and non call order according to the creditor according to the creditor according to the creditor according to the creditor has both priority and non call order according to the creditor has both priority and non call order according to the creditor has both priority and non call order according to the creditor has both priority and non call order according to the creditor has both priority and non call order according to the creditor has both priority and non call order according to the creditor has both priority and non call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority and call order according to the creditor has both priority according to the creditor has been considered to the creditor has both priority according to the creditor has been	Property. If more space is need On the top of any additional parts. 1? The than one priority unsecured clair priority amounts, list that claim here ditor's name. If you have more than	ded, copy the Part you need ges, write your name and me, list the creditor separately and show both priority and r	d, fill it out, case numb	number the per (if known aim. For each mounts. As n	claims that e entries in 1).
Part 1.	ted in Sche bxes on the List A Do any cree No. Go Yes. List all of ye identify what possible, list Part 1. If mo	edule D: Creditors Who left. Attach the Continuity of Your PRIORIT ditors have priority under the Part 2. Our priority unsecured type of claim it is. If a claims in alphabetic the claims in alphabetic the chains one creditor hole.	no Hold Claims Secured by nuation Page to this page. IY Unsecured Claims against you declaims. If a creditor has more laim has both priority and non cal order according to the credits a particular claim, list the country of the credits a particular claim, list the country of the credits and particular claim, list the country of the credits and particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim.	Property. If more space is need On the top of any additional parts. The than one priority unsecured clair priority amounts, list that claim here ditor's name. If you have more than other creditors in Part 3.	ded, copy the Part you need ges, write your name and m, list the creditor separately e and show both priority and rentwo priority unsecured claim	d, fill it out, case numb	number the per (if known aim. For each mounts. As n	claims that e entries in 1).
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Part 1.	ted in Sche bxes on the List A Do any cree No. Go Yes. List all of ye identify what possible, list Part 1. If mo	edule D: Creditors Who left. Attach the Continuity of Your PRIORIT ditors have priority under the Part 2. Our priority unsecured type of claim it is. If a claims in alphabetic the claims in alphabetic the chains one creditor hole.	no Hold Claims Secured by nuation Page to this page. IY Unsecured Claims against you declaims. If a creditor has more laim has both priority and non cal order according to the credits a particular claim, list the country of the credits a particular claim, list the country of the credits and particular claim, list the country of the credits and particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim.	Property. If more space is need On the top of any additional parts. The than one priority unsecured clair priority amounts, list that claim here ditor's name. If you have more than other creditors in Part 3.	ded, copy the Part you need ges, write your name and m, list the creditor separately e and show both priority and rentwo priority unsecured claim	d, fill it out, case numb	number the per (if known aim. For each mounts. As n e Continuatio	claims that e entries in 1). In claim listed, nuch as on Page of Nonpriority
Part 1. 2.	ted in Sche bxes on the List A Do any cree No. Go Yes. List all of ye identify what possible, list Part 1. If mo	edule D: Creditors Who left. Attach the Continuity of Your PRIORIT ditors have priority under the Part 2. Our priority unsecured type of claim it is. If a claims in alphabetic the claims in alphabetic the chains one creditor hole.	no Hold Claims Secured by nuation Page to this page. IY Unsecured Claims against you declaims. If a creditor has more laim has both priority and non cal order according to the credits a particular claim, list the country of the credits a particular claim, list the country of the credits and particular claim, list the country of the credits and particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim, list the country of the credits are particular claim.	Property. If more space is need On the top of any additional parts. The than one priority unsecured clair priority amounts, list that claim here ditor's name. If you have more than other creditors in Part 3.	ded, copy the Part you need ges, write your name and m, list the creditor separately e and show both priority and rentwo priority unsecured claim	d, fill it out, case numb	number the er (if known aim. For each mounts. As n e Continuatio	claims that e entries in 1). In claim listed, nuch as on Page of

Doc 1 Filed 06/20/16 Entered 06/20/16 (12:52:09 Desc Main Debtor 1 Documernt Page 24 of 65 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 ASPEN COLL \$1,085.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 105341 6/1/2010 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Atlanta Georgia 30348 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Collection; Collecting for ORIGINAL Is the claim subject to offset? **7** CREDITOR: 05 MIZNER PLACE **✓** No Other, Specify OWNER ASSOC Yes 4.2 BAXTER CREDIT UNION \$176.00 Last 4 digits of account number 0103 Nonpriority Creditor's Name 340 N Milwaukee Ave When was the debt incurred? 5/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 60061 Vernon Hills Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed **V** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify_ 024 InstallmentLoan **✓** No Yes 4.3 Blitt & Gaines PC \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 661 Glenn Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Wheeling Illinois 60090 Unliquidated Citv State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims

✓ No ☐ Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify_

Debts to pension or profit-sharing plans, and other similar debts

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First Name Document Page 25 of 65

Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.4	Cavalry SPV I, LLC	Last 4 digits of account number	\$7,363.36
	Nonpriority Creditor's Name 500 Summit Lake Dr Ste 400	When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Valhalla New York 10595	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Judgment	
	No	V Curiot. Opening Gadgment	
	☐ Yes		
14 = 1			• • • • • • •
4.5	Condell Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	\$3,630.75
	755 S Milwaukee Ave Ste 127 Number Street	When was the debt incurred?n/a	
	Trained Chock	As of the date you file, the claim is: Check all that apply.	
	Libert III. 00040	Contingent	
	Libertyville Illinois 60048 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Medical	
	✓ No		
	Yes		
4.6	HARRIS & HARRIS LTD	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 111 W Jackson Blvd #400	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago Illinois 60604	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	✓ Other. Specify Notice	
	Is the claim subject to offset?		
	✓ No		
	Yes		

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First Name Document Page 26 of 65

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.7	LC SYSTEM INC Nonpriority Creditor's Name PO BOX 64378 Number Street	Last 4 digits of account number 3001 When was the debt incurred? 12/1/2014 As of the date you file, the claim is: Check all that apply.	\$143.00
	SAINT PAUL Minnesota 55164 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts O01 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT Other. Specify DATA	
4.8	MIDLAND FUNDING Nonpriority Creditor's Name 8875 AERO DR STE 200 Number Street SAN DIEGO California 92123 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No □ Yes	Last 4 digits of account number 2274 When was the debt incurred? 2/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify 001 UnknownLoanType	\$350.00

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Add the Amounts for Each Type of Unsecured Claim

Part 4:

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6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$0.00 **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that 6i. amount here. \$12,748.11 6j. Total. Add lines 6f through 6i. 6j.

	Case 16-2006		6/20/16 Entere	ed 06/20/16 12:52:09	Desc Main
Fill in this inform	nation to identify your case) :	J.		
Debtor 1	Stanley		Carter		
	First Name	Middle Name	Last Name		
Debtor 2	\ = :				
(Spouse, if filing	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)					
Official I	Form 106G				Check if this is ar amended filing
Schedul	e G: Execut	ory Contracts a	and Unexpire	ed Leases	12/1
	d, copy the additional p			e equally responsible for supply is page. On the top of any additi	ing correct information. If more onal pages, write your name and
1. Do you ha	ave any executory	contracts or unexpired	leases?		
✓ No. Che	ck this box and file this for	m with the court with your othe	r schedules. You have not	hing else to report on this form.	
Yes. Fill	in all of the information be	elow even if the contracts or lea	ses are listed on Schedul	le A/B: Property (Official Form 106A	√B).
	•	. ,		en state what each contract or le examples of executory contracts ar	
Person	or company with whor	n you have the contract or le	ase	State what the contrac	t or lease is for

		Case 16-2006	4 Doc 1 Filad (06/20/16 Entered	<u>06/2</u> 0/16 12:52:09	Desc Main
Fill	in this inform	nation to identify your case		10/20/10 Filleren	00/20/10 12.52.09	Desc Main
De	btor 1	Stanley		Carter		
Do	btor 2	First Name	Middle Name	Last Name		
		First Name	Middle Name	Last Name	_	
Un	ited States B	ankruptcy Court for the:	Northern	District of Illinois		
	se number known)			(State)	_	
	<u> </u>					Check if this is an amended filing
O	fficial F	Form 106H				3
		e H: Your Co	odebtors			12/1:
in th	ne boxes on ry question.	the left. Attach the Ado	litional Page to this page. C		Pages, write your name and c	je, fill it out, and number the entries case number (if known). Answer
2.	Louisiana, N No. G Yes. D	Nevada, New Mexico, Puo o to line 3. Did your spouse, former sp No	erto Rico, Texas, Washington,	and Wisconsin.) with you at the time?	unity property states and territor	ries include Arizona, California, Idaho,
		res. In which community s	state or territory did you live? _	Fiii in the	name and current address of th	at person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	_	
		Number Street			_	
		City	State	Zip Code	_	
3.	as a codeb	tor only if that person i	s a guarantor or cosigner.	Make sure you have listed th		the person shown in line 2 again fficial Form 106D), <i>Schedule E/F</i> plumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Fill in th	nis information to identify	y your case:	-		0/16 12	:52:09 D	esc Main	
		Docar	nent ra	g e oo o i	00			
Debtor 1	Stanley		Carter		_			
	First Name	Middle Name	Last Name			Check if this is:		
Debtor 2					_	_		
Spouse,	if filing) First Name	Middle Name	Last Name			An amende	d filing	
United St	ates Bankruptcy Court for the:	Northern	District of Illinois		_		ent showing pos s of the followin	st-petition chapter 13 ng date:
Case nun	nher		(State)				
(If known)					-	MM / DD / `	YYYY	
	al Form 106l							
<u>iche</u>	dule I: Your Inc	ome						12/15
ages, v		e. If more space is neede se number (if known). An			heet to this f	orm. On the	top of any	additional
1.	Fill in your employment		Debtor 1			Debtor 2		
	information.	Employment status						
	If you have more than one	Employment status	✓ Employed			Employed		
	job,		Not Employ	ed		Not Emplo	yed	
	attach a separate page with	Occupation	Actvity Aid					
	information about additional	Occupation	Activity Alu			-		
	employers.	Employer's name	Lincolnshire Liv	ring & Rehab		-		
	Include part time, seasonal,	Employer's address	7040 N Ridgew	21/				
	or	Linployer 3 address	Number Street	ay		Number Street		
	self-employed work.							
	Occupation may include							
	student							
	or homemaker, if it applies.		Lincolnwood	Illinois	60712			
			City	State	Zip Code	City	State	Zip Code
		How long employed there?	11 years					
Estimat are sepa If you or a separa 2. Lis	arated. your non-filing spouse have mo ate sheet to this form. at monthly gross wages, salar	Monthly Income date you file this form. If you have than one employer, combine the complex than the complex	ne information for a	all employers For			If you need mo	-
3. Es t	timate and list monthly overt	time pay.	3		+ \$0.00			

4. Calculate gross income. Add line 2 + line 3.

\$1,942.42

Debtor 1 Stanley Case 16-20064 Doc 1 Filed 06/249/16 Entered @6/20/166 12:52:09 Desc Main Documentame Page 31 of 65 Middle Name For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$1,942.42 5. List all payroll deductions: \$381.70 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$250.38 5f. Domestic support obligations 5f. \$0.00 5q. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$45.54 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$677.63 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,264.79 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10.Calculate monthly income. Add line 7 + line 9. 10. \$1,264.79 \$1,264.79 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$1,264.79 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

Debtor 1 Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 12:52:09 Desc Main

First Name Middle Name Documentame Page 32 of 65

Part 2: Give Details About Monthly Income

	For Debtor 1	For Debtor 2 or non-filing spouse
5h.Other payroll deductions. Specify:		
1. Dental	\$39.67	
2. Vision	\$5.87	

Pirst Name	Eillia (biaista)	Case 16-2006		06/20/16 Entered 06	/20/16 12:52:09	Desc Main	
Pirst Name	Fill in this inform	lation to identity your cas	e:	J			
Check if this is: An amended filing An a	Debtor 1						
Spouse, if filing) First Name	Dalatano	First Name	Middle Name	Last Name	Charle if this is:		
United States Bankruptcy Court for the: Northern District of Illinois (Slate) A supplement showing post-petition chapter 13 expenses as of the following date: MM / DD / YYYY Official Form 106J Schedule J: Your Expenses MM / DD / YYYY Official Form 106J Schedule J: Your Expenses 12/11 S) First Name	Middle Name	Last Name			
Case number MM / DD / YYYY Difficial Form 106J Schedule J: Your Expenses 12/11 See as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number known). Answer every question. Part 1: Describe Your Household I. Is this a joint case? No. Go to line 2 Yes. Debtor 2 must file Official Forms 106.1-2. Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Yes. Fill out this information for Dependent's relationship to Dependent's Does dependent live dependent Debtor 1 or Debtor 2 debtor 1 debtor 1 debtor 1 debtor 1 debtor 1 debtor 1 debtor 1 debtor 1 debtor 1 debtor 1 debtor 1 debt					=		
Official Form 106J Schedule J: Your Expenses as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number known). Answer every question. and 1: Describe Your Household 1. Is this a joint case? No. Go to line 2 No. Go to line 2 No. Do you have dependents? No Donot list Debtor 1 and Debtor 2. 2. Do you have dependents? No Donot list Debtor 1 and Debtor 2. 3. Do your expenses include expenses of people other than your expenses of people other than your dependents? No Debtor 3 and a first the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I. Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any tent for the ground or lot 4. If not included in line 4: 4a. Real estate taxes 4a. \$0,000 4b. \$0,000	United States B	ankruptcy Court for the:	Northern			•	chapter 13
Difficial Form 106J Schedule J: Your Expenses as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number I known). Answer every question. 2011: Describe Your Household 1. Is this a joint case? No. Go to line 2 Yes. Deebtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Pessill out this information for each dependent live with you? 3. Do your expenses include expenses of people other than yourself and your dependents? Yes. Describe Your Ongoing Monthly Expenses Estimate Your ongoing Monthly Expenses of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Real estate taxes 4. \$0.00 4. Froperty, homeowners, or renter's insurance 4. \$0.00 4. Froperty, homeowners, or renter's insurance	Case number			(Citato)		3	
e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (known). Answer every question. Part II Describe Your Household	(If known)				MM / DD / YYYY	_	
e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (known). Answer every question. Part II Describe Your Household	Official F	Form 106.I					
e as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (known). Answer every question. Answer every question.		-					
Information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number I known). Answer every question. It is this a joint case? Secribe Your Household	schedul	e J: Your Ex	penses				12/1
ant 1: Describe Your Household 1. Is this a joint case? No. Go to line 2 No. Go your bankers fill out this information for belot 2 No. Go your beneses include expenses as of people other than your expenses as of people other than your dependents? No. Go your expenses as of your bankruptcy lifing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such date. No. Go your expenses included in the date. No. Go your expenses as of your expenses for your residence. Include first mortgage payments and a supplement in a Chapter 13 case to report expenses and fill in the papicable date. No. Go your expenses and fill in the p	nformation. If n	nore space is needed, a					er
1. Is this a joint case? No. Go to line 2 Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Yes. Fill out this information for each dependent Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2 Yes. Fill out this information for each dependent Debtor 1 or Debtor 2 Dependent's relationship to age Does dependent live with you? 3. Do your expenses include expenses of people other than yourself and your dependents? Yes Yes Description Yes Dependent's relationship to Dependent's relationship to age Does dependent live with you? No Yes Dependent Yes Dependent's relationship to Dependent's relationship to age Does dependent live with you? No Yes Dependent Yes Dependent Yes Dependent's relationship to Dependent's possible to people other than yourself and your dependents? Yes Dependent Yes Dependent's relationship to Dependent's r		, .	old				
No. Go to line 2 Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. 3. Do your expenses include expenses include expenses for Debtor 1 or Debtor 2							
Yes. Does Debtor 2 live in a separate household? No							
No							
Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No	Yes. Do	es Debtor 2 live in a se _	parate household?				
2. Do you have dependents?		No					
Do not list Debtor 1 and Debtor 2.		Yes. Debtor 2 must file	Official Forms 106J-2, Experi	ses for Separate Household of Deb	otor 2.		
Debtor 2. each dependent Debtor 1 or Debtor 2 age with you? 3. Do your expenses include expenses of people other than yours dependents? 2. Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. \$0.00	2. Do you have	e dependents?	0				
expenses of people other than your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00				•	•	•	ent live
than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00		T A I N	_				
yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00	•	people other	0				
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00		your Ye	es				
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4b. \$0.00	dependents	?					
expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. \$0.00	Part 2: Estin	nate Your Ongoing	Monthly Expenses				
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00	expenses as o	f a date after the bankr	. , .			•	
any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00						You	ır expenses
If not included in line 4: 4a. Real estate taxes 4a. Property, homeowner's, or renter's insurance 4b. \$0.00			enses for your residence. In	clude first mortgage payments and		4.	\$300.00
4a. Real estate taxes 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00	If not inclu	ided in line 4:				••	
4b. Property, homeowner's, or renter's insurance 4b. \$0.00						4a	\$0.00
4. Usus antitatana ant	4b. Propert	y, homeowner's, or renter	's insurance			•	
10: Florite Hairite Hairite and aprecep expenses						4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 (1/20/52:09 Desc Main

Document Page 34 of 65 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$45.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$250.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$25.00 9. 10. Personal care products and services \$15.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$75.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$100.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _ \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$450.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1	Stanley Case 16		Filed 06¢20/16	Entered 06/20/16 /42:52:09	Desc Main			
	First Name	Middle Name	Documetht end	Page 35 of 65				
21. Other.	. Specify:				21	\$0.00		
22. Calcu	late your monthly ex	cpenses.				\$1,260.00		
22a. A	dd lines 4 through 21.					\$0.00		
22b. C	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2							
22c. A	dd line 22a and 22b. T	The result is your monthly ex	rpenses.		22.			
23. Calcul	late your monthly ne	et income.						
23a. C	23a. Copy line 12 (your combined monthly income) from Schedule I.							
23b. C	23b. Copy your monthly expenses from line 22 above.							
	23c. Subtract your monthly expenses from your monthly income.							
٦	The result is your mon	thly net income.			23c			
24. Do yo	ou expect an increas	e or decrease in your exp	enses within the year aft	ter you file this form?				
For e	yamnle do vou expec	t to finish paying for your ca	r loan within the year or do	vou expect vour				
		ase or decrease because of	,					
✓ N	No							
	′es							
Ш,	es					1		
	Explain here:	•						
						7		

	Case 16-20064	. Doc 1 Filed 06	3/20/16 Entoro	d 06/20/16 12:52:09	Doce Main	
Fill in this info	ormation to identify your case		www.	1100/20/10 12.52.09	Desc Main	
Debtor 1	Stanley		Carter			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if fill	ing) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
	, ,		(State)			
Case number (If known)						
Official	Form 106Dec	<u> </u>			Check if this is a amended filing	
Declara	ation About ar	Individual Del	otor's Sched	ules	12/1	
If two married	d people are filing together	, both are equally responsib	le for supplying correct	information.		
1519, and 357 Part 1: Sig	gn Below	one who is NOT an attorney	to help you fill out bankı	ruptcy forms?		
✓ No						
Yes. Name of person				Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		
that the	y are true and correct.	that I have read the summar	*	rith this declaration and		
J			_			
Date <u>6/2</u> M	20/2016 M/DD/YYYY		Date _ N	MM/DD/YYYY		

	in this in		se 16-20064 o identify your case		Filed 06/20/16	Entered 06/	20/16 12:52:09	Desc Main
	otor 1	Stan		·-	Carter	J		
Doh	otor 2		Name	Middle N	Name Last Na	ame		
		filing) First	Name	Middle N	Name Last Na	ame		
Unit	ted Stat	tes Bankrup	tcy Court for the:	Northern	District of Illin	nois tate)		
	se numb	per			(3)			
<u> </u>	<u> </u>	al Fori	m 107					Check if this is a amended filing
				al Affaire	for Individua	ale Filina :	for Bankrunt	· ·
Be a spac	s comp e is ne	olete and a eded, attac	ccurate as possib ch a separate shee	ele. If two married to this form. On	people are filing together	er, both are equally al pages, write you	responsible for supply	ring correct information. If more or (if known). Answer every question
1.			current marital sta					
		Married Not marrie						
2.	Duri	ing the last	3 years, have you	ı lived anywhere o	other than where you live	now?		
	✓	No Yes. List al	l of the places you li	ved in the last 3 yea	ars. Do not include where y	ou live now.		
		Debtor 1:			Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
						Same as D	ebtor 1	Same as Debtor 1
		Number S	Street		From	Number Stree	t	From
					_ To			To
		City	State	Zip Code	_	City	State Zip C	ode
		•				Same as D	· · · · · · · · · · · · · · · · · · ·	Same as Debtor 1
		Number S	:troot		- From	Number Stree	+	From
			ou eet			- Street		To
	•	City	State	Zip Code	_	City	State Zip C	ode
3.				-				(Community property states and
	✓ No	0	, ,	, ,	Nevada, New Mexico, Pue otors (Official Form 106H).	πο κιco, Texas, Was	snington, and Wisconsin.)	

Debtor 1 Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 (142):52:09 Desc Main

st Name Middle Name Documername Page 38 of 65

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art 2: Explain the Sources of You	r Income			
Did you have any income from employ Fill in the total amount of income you rece activities. If you are filing a joint case and you have Yes. Fill in the details.	eived from all jobs and all businesses	s, including part-time		•
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year unti the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$10414.30	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31,	✓ Wages, commissions, bonuses, tips Operating a business	\$23935.00	Wages, commissions, bonuses, tips Operating a business	
For the calendar year before that: (January 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	\$23000.00	Wages, commissions, bonuses, tips Operating a business	
Include income regardless of whether that benefit payments; pensions; rental income and you have income that you received tog List each source and the gross income fro No Yes. Fill in the details.	; interest; dividends; money collected ether, list it only once under Debtor 1	d from lawsuits; royalties; and	d gambling and lottery winnings.	
_	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year unti the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31, 2015)			
For the calendar year before that: (January 1 to December 31,2014				

Debtor 1 Stanley Case 16-20064 First Name Doc 1

Document Page 39 of 65 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Are eith	Are either Debtor 1's or Debtor 2's debts primarily consumer debts?							
No.			or 2 has primarily c sehold purpose."	onsumer debts. Cons	sumer debts are defined in 1	1 U.S.C. § 101(8) as "incurr	ed by an individual primarily	
	During the 90 o	days before yo	u filed for bankruptcy,	did you pay any credito	or a total of \$6,425* or more?	,		
	No. Go to	line 7.						
	Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
	* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.							
✓ Yes.	✓ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.							
_	During the 90 c	days before yo	u filed for bankruptcy,	did you pay any credito	or a total of \$600 or more?			
	No. Go to		, i i i i i i i i i i i i i i i i i i i	, , ,	, , , , , , , , , , , , , , , , , , ,			
	Yes. List	below each cr creditor. Do n	ot include payments		ore and the total amount you oligations, such as child sup ankruptcy case.	•		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
	editor's Name				-	-	Mortgage Car Credit card	
_							Loan repayment Suppliers or	
Cit	ty	State	Zip Code				vendors Other	
Cr	editor's Name				_	_	─ Mortgage─ Car	
Nu	ımber Street						Credit card Loan repayment	
Cit	ty	State	Zip Code				Suppliers or vendors Other	
_							- Mortgage	
Cr	editor's Name						Car	
Nu	ımber Street						Credit card	
_							Loan repayment	
Cit	tv	State	Zip Code				Suppliers or vendors	
Oil	• 9	Sidio	Zip Oodc				Other	

Doc 1 Filed 06/20/16 Entered 06/20/16 162:52:09 Desc Main Debtor 1 Document Page 40 of 65 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9.		n 1 year before you filed for bankrupto such matters, including personal injury ca es.						
	✓ N	lo es. Fill in the details.						
			Nature	of the case	Court or ag	ency		Status of the case
		Case title						Pending
			-		Court Name	!		On appeal
		Case number			Number Stre	eet		Concluded
					City	State	Zip Code	-
		Case title						Pending
			_		Court Name			On appeal
		Case number			Number Stre	eet		- Concluded
			_		City	State	Zip Code	_
	Ī	Yes. Fill in the information below.		Describe the proper	rty		Date	Value of the property
		Creditor's Name		Explain what happe	nod			
		N. orlean Otroni		Explain what happe	ileu			
		Number Street City State Zi	o Code	Property was rep Property was fore Property was gar Property was atta	eclosed. rnished.	r levied.		
				Describe the prope	rty		Date	Value of the property
		-						
		Creditor's Name		Evalois what have	الم ما			
		Number Street		Explain what happe	nea			
				Property was rep	ossessed.			
				Property was fore				
				Property was gai				
		City State Zi	o Code	Property was atta	ached, seized, o	r levied.		

Deb	tor 1		<u>led 06¢20/16 Entered</u> 06/20/16	::09 Desc	Main
11.		ounts or refuse to make a payment because you o	ny creditor, including a bank or financial institution, set o	off any amounts f	om your
		No Yes. Fill in the details.			
			Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name	_		
		Number Street	_	_	
			Last 4 digits of account number: XXXX-		
		City State Zip Code	_		
12.		in 1 year before you filed for bankruptcy, was any iver, a custodian, or another official?	y of your property in the possession of an assignee for the	ne benefit of cred	itors, a court-appointed
	✓	No Yes			
Part	5:	List Certain Gifts and Contributions			
13.	Wit	thin 2 years before you filed for bankruptcy, did yo	ou give any gifts with a total value of more than \$600 per	person?	
	✓	No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift	_		
		Number Street			
		City State Zip Code	_		
		Person's relationship to you			
		Person to Whom You Gave the Gift	 		
		Number Street	_		
		City State Zip Code			
		Person's relationship to you			

		FIRST Name	IVII	dale Name DO	ocument Page 43 of 65				
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?								
	✓	No Yes. Fill in the details	for each gift or	contribution.					
		Gifts with a total va			Describe the gifts	Dates you gave the gifts	Value		
		Charity's Name							
		Number Street							
		City	State	Zip Code					
Part		List Certain Loss							
15.		in 1 year before you bling?	filed for bank	ruptcy or since ye	ou filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or		
		No You Fill in the details							
	Ц	Yes. Fill in the details. Describe the proper		nd	Describe any insurance coverage for the loss	Date of your	Value of property lost		
		how the loss occurr	rea		Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	loss			
Part	7 :	List Certain Payn	nents or Tr	ansfers					
16.		in 1 year before you ing bankruptcy or pi			anyone else acting on your behalf pay or transfer any	property to anyor	ne you consulted about		
					counseling agencies for services required in your bankrupt	су.			
		No Yes. Fill in the details.							
					Description and value of any property transferred	Date payment or transfer was made	Amount of payment		
		Semrad Law Firm			Attorney's Fee - 0.00	6/16/2016	\$0.00		
		Person Who Was Pai	d		,		·		
		20 South Clark Street	28th Floor						
		Number Street							
		Chicago	Illinois	60606					
		City	State	Zip Code					
		Email or website addi None							
		Person Who Made the	e Payment, if N	ot You		<u> </u> 			
		Person Who Was Pai	d						
		Number Street							
		City	State	Zip Code					
		Email or website add	ress						
		Person Who Made the	e Payment, if N	ot You					

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	Yes. Fill in the details.	Description and value of any prop	erty transferred	Date payment or transfer	Amoun	t of paymen
				was made		
	Person Who Was Paid					
	Number Street	_				
	City State Zip Code					
trans	de both outright transfers and transfers made as sec fers that you have already listed on this statement. No Yes. Fill in the details.	curity (such as the granting of a security inte	erest or mortgage on	your property). Do	not inclu	de gifts and
		Description and value of any property transferred		property or paym ebts paid in exch		Date transf was made
	Person Who Received Transfer					
	Number Street					
	City State Zip Code Person's relationship to you					
	Person Who Received Transfer	_				
	Number Street					
	City State Zip Code					
	Person's relationship to you			evice of which yo	u are a b	eneficiary?
The	hin 10 years before you filed for bankruptcy, did years often called asset-protection devices.) No	you transfer any property to a self-settle	d trust or similar d	ŕ		
(The	nin 10 years before you filed for bankruptcy, did y se are often called asset-protection devices.)	you transfer any property to a self-settle Description and value of the prop		·		Date transf

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Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

cooperatives, associations, and other financial institutions.	
✓ No ☐ Yes. Fill in the details.	
Last 4 digits of account number Type of account instrument	
Person Who Was Paid XXXX- Checkin	<u> </u>
Number Street Money n	
City State Zip Code	
Person Who Was Paid XXXX- Checkin Savings	<u> </u>
Number Street Money n	
City State Zip Code	
valuables? No Yes. Fill in the details. Who else had access to it? De	Do you still have it?
Name of Financial Institution Name	□ No
Number Street Number Street	Yes
City State Zip Code	
City State Zip Code	
 22. Have you stored property in a storage unit or place other than your home within 1 year before you find No Yes. Fill in the details. 	iled for bankruptcy?
Who else had access to it?	scribe the contents Do you still have it?
Name of Storage Facility Name	□ No
Number Street Number Street	Yes
City State Zip Code City State Zip Code	

Deb	tor 1	First Name Middle Name	Docum	ënt™ Paç	ntered 06/2 ge 46 of 65	60/1⊾6/1⊾2:52: <u>09 Desc Mair</u>	1
Part	9:	Identify Property You Hold or Contro	I for Some	one Else			
23. Do		you hold or control any property that someone No	e else owns? I	nclude any pro	perty you borro	wed from, are storing for, or hold in tru	st for someone.
	Ц	Yes. Fill in the details.	Where is th	ne property?		Describe the contents	Value
		Owner's Name	Number Str	root		-	
			- Number Su	eet			
		Number Street					
			City	State	Zip Code	-	
		City State Zip Code	_				
Part	10:	Give Details About Environmental In	nformation				
For	the p	urpose of Part 10, the following definitions apply:					
	ha	nvironmental law means any federal, state, or local azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clear	nto the air, land	l, soil, surface wa	ater, groundwater,		
		ite means any location, facility, or property as define used to own, operate, or utilize it, including dispos	•	vironmental law,	whether you now	own, operate, or utilize it	
		lazardous material means anything an environment xic substance, hazardous material, pollutant, conta			aste, hazardous s	substance,	
Rep	oort al	I notices, releases, and proceedings that you know	about, regardle	ess of when they	occurred.		
24.	Has	any governmental unit notified you that you r	may be liable o	or potentially lia	able under or in	violation of an environmental law?	
	✓	No					
		Yes. Fill in the details.	Governme	ntal unit		Environmental law, if you know it	Date of notice
			Governmen	ntai unit		Environmental law, ii you know it	Date of flotice
		Name of site	Government	al unit			
		Number Street	Number Str	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	_				
25.	Hav	e you notified any governmental unit of any re	elease of haza	rdous material	?		
	✓	No					
		Yes. Fill in the details.	_				
			Governmen	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Government	al unit		-	
		Number Street	Number Str	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	_				

Debt	tor 1	StanleyCase 16-200 First Name	064 Doc 1 Middle Name		Entered 06/20 Page 47 of 65)√n1.66 ∩1.22.52: <u>09 DescN</u>	<u>lain</u>				
26.	Hav	e you been a party in any	judicial or administra	ative proceeding under	any environmental law	? Include settlements and orders	.				
	✓	No									
	Ц	Yes. Fill in the details.		Court or agency		Nature of the case	Status of the				
		Case title					case				
				Court Name	_		Pending				
							On appeal				
		Case number		Number Street			Concluded				
		_		City Stat	te Zip Code						
Part	11:	Give Details About Y	our Business or	Connections to A	ny Business						
27.	With	nin 4 years before you file	d for bankruptcy, did	you own a business o	r have any of the follow	ing connections to any business	?				
		A sole proprietor or sel	lf-employed in a trade,	profession, or other activ	vity, either full-time or part	-time					
) or limited liability partne	ership (LLP)						
		A partner in a partners An officer, director, or r		a corporation							
				y securities of a corporati	ion						
	✓	No. None of the above applies. Go to Part 12.									
		Yes. Check all that apply ab	ove and fill in the detail								
				Describe the na	ature of the business	Employer Identification include Social Security					
		Business Name				EIN:					
						Data basin a satisfa I					
		Number Street		Name of accou	intant or bookkeeper	Dates business existed					
		City State	e Zip Code			From To					
				Describe the na	ature of the business	Employer Identification include Social Security					
		Business Name				EIN:					
		Number Street		Name of accou	intant or bookkeeper	Dates business existed					
		City State	e Zip Code			From To					
				Describe the na	ature of the business	Employer Identification					
						include Social Security	number or ITIN.				
		Business Name				EIN:					
		Number Street		Name of accou	intant or bookkeeper	Dates business existed					
		City State	e Zip Code			From To					
		Chy Clair									

	Stanley Case 16-200		Filed 06¢2⁄0/16	Entered 06/20/166/1k2:52:09	Desc Main
	First Name	Middle Name	Documetnt de la	Page 48 of 65	
	ithin 2 years before you filed editors, or other parties.	d for bankruptcy, did	you give a financial sta	tement to anyone about your business? In	clude all financial institutions,
<u> </u>	<u> </u>				
_	Yes. Fill in the details below	•	Date issued		
	Name		MM/DD/YYYY		
	Number Street				
	City State	e Zip Code			
	•	·			
Part 12	Sign Below				
and	l correct. I understand that i	making a false staten	nent, concealing proper	chments, and I declare under penalty of pe rty, or obtaining money or property by frau	
		ines up to \$250,000, o	r imprisonment for up t	o 20 years, or both. 18 U.S.C. §§ 152, 1341,	1519, and 3571.
	/s/ Stanley	Carter	r imprisonment for up t	*	1519, and 3571.
	•	Carter	r imprisonment for up t		1519, and 3571.
	/s/ Stanley	Carter ebtor 1	r imprisonment for up t	*	1519, and 3571.
Did	/s/ Stanley Signature of D Date 6/20/20	Carter ebtor 1 16		Signature of Debtor 2	
Did	/s/ Stanley Signature of D Date 6/20/20	Carter ebtor 1 16		Signature of Debtor 2 Date	
Did	/s/ Stanley Signature of D Date 6/20/20 you attach additional page	Carter ebtor 1 16		Signature of Debtor 2 Date	
✓	/s/ Stanley Signature of D Date 6/20/20 you attach additional page	Carter ebtor 1 16 s to Your Statement o	of Financial Affairs for	Signature of Debtor 2 Date Individuals Filing for Bankruptcy (Official	
✓	/s/ Stanley Signature of D Date 6/20/20 you attach additional page No Yes	Carter ebtor 1 16 s to Your Statement o	of Financial Affairs for	Signature of Debtor 2 Date Individuals Filing for Bankruptcy (Official	
✓	/s/ Stanley Signature of D Date 6/20/20 you attach additional page No Yes you pay or agree to pay so	Carter ebtor 1 16 s to Your Statement o	of Financial Affairs for	Signature of Debtor 2 Date Individuals Filing for Bankruptcy (Official	Form 107)? n Preparer's Notice,

	Case 16-2006	4 Doc 1 Filed	06/20/16 E	Entered 06/20/16 12:52:09	Desc Main
Fill in this inform	ation to identify your cas			0/10 12.32.03	Desc Main
Debtor 1	Stanley		Carter		
	First Name	Middle Name	Last Nam	e	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nam	<u>e</u>	
United States Ba Case number (If known)	ankruptcy Court for the:	Northern	District of Illinoi (State		
	Form 108				Check if this is an amended filing
If you are an ind creditors hav you have lease You must file thi whichever is ear If two married po	ividual filing under che claims secured by your sed personal property as form with the court when the court ender, unless the court enders.	apter 7, you must fill out the pur property, or and the lease has not expir within 30 days after you file xtends the time for cause.	nis form if: red. e your bankruptcy You must also ser	petition or by the date set for the meeting copies to the creditors and lessors you le for supplying correct information.	•
Re as complete	and accurate as nossil	hle. If more snace is neede	d attach a senara	te sheet to this form. On the top of any a	dditional nages

write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: BAXTER CREDIT UNION Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 060 Automobile Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a Reaffirmation Agreement. property securing debt: Retain the property and [explain]:

Debtor Stanley Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 Stanley Document Page 50 of 65 First Name Middle Name	0/16 12:52:09 Desc Main
Part 2: List Your Unexpired Personal Property Leases	
For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Uniformation below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	☐ No ☐ Yes
Description of leased property:	
Lessor's name:	☐ No ☐ Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property of my es that is subject to an unexpired lease.	tate that secures a debt and any personal property
X /s/ Stanley Carter X	

×	/s/ Stanley Carter	×
;	Signature of Debtor 1	Signature of Debtor 1
ı	Date 6/20/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re _	Stanley Carter		Case No.	(16.1
	Debtor		Chapter	(If known) Chapter 7
				Chapter 1
	DISCLOSURE (OF COMPENSAT	ON OF ATTORNEY FO	R DEBTOR
1.	compensation paid to me within	one year before the filing o	I certify that I am the attorney for the a f the petition in bankruptcy, or agreed to templation of or in connection w ith the	o be paid to me, for services
	For legal services, I have agree	d to accept		\$1,470.0
	Prior to the filing of this statement	ent I have received		\$0.0
	Balance Due			\$1,470.0
2.	The source of the compensation	paid to me was:		
	✓ Debtor	Other (spec	cify)	
3.	The source of the compensation	paid to me is:		
	J Debtor	Other (spec	cify)	
4.	I have not agreed to share to members and associates of	he above-disclosed comper f my law firm.	nsation with any other person unless the	ey are
		ny law firm. A copy of the a	on with a other person or persons who a greement, together with a list of the na	
5.		-	er legal service for all aspects of the baring advice to the debtor in determining	· · ·
	b. Preparation and filing of	any petition, schedules, sta	tements of affairs and plan which may	be required;
	c. Representation of the de	btor at the meeting of credit	ors and confirmation hearing, and any a	adjourned hearings thereof;
6.	By agreement with the debtor(s)	, the above-disclosed fee d	oes not include the following services:	
		CERT	FICATION	
	I certify that the foregoing is a co debtor(s) in this bankruptcy proce		reement or arrangement for payment to	o me for representation of
	6/20/2016		/s/ Nathan Delman	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1420.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Stanley D. Carter Matter Number 481233-001 Initial: 4

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

Lunderstand that Lam to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. Lunderstand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 6/20/16

Client

Client _____

Attornev

Stanley D. Carter Matter Number 481233-001 Initial: 160

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$310	total fee
+	\$75	administrative fee
	\$235	filing fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-20064 Doc 1 Filed 06/20/16 Entered 06/20/16 12:52:09 Desc Main UNITED STATES BANKBURG COURT Northern District of Illinois

In re:	Carter, Stanley	Case No
	Debtor(s)	
		Chapter. Chapter7
	VERIFICA	TION OF CREDITOR MATRIX
	The above named Debtors hereby verify that	the attached list of creditors is true and correct to the best of their knowledge.
Date:	6/20/2016	/s/ Carter, Stanley
	<u> </u>	Carter, Stanley
		Signature of Debtor

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BAXTER CREDIT UNION 340 N Milwaukee Ave Vernon Hills , IL 60061 USA

ASPEN COLL PO Box 105341 Atlanta , GA 30348 USA

MIDLAND FUNDING 8875 AERO DR STE 200 SAN DIEGO , CA 92123 USA

BAXTER CREDIT UNION 340 N Milwaukee Ave Vernon Hills , IL 60061 USA

I C SYSTEM INC PO BOX 64378 SAINT PAUL , MN 55164 USA

Cavalry SPV I, LLC 500 Summit Lake Dr Ste 400 Valhalla , NY 10595 USA

Blitt & Gaines PC 661 Glenn Ave Wheeling , IL 60090 USA

Condell Medical Center 755 S Milwaukee Ave Ste 127 Libertyville , IL 60048 USA

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604 USA

Debtor 1 Stanley Case 16-2	20064 Doc 1 Filed 06 Docum estions for Reporting Purpose	20/16 Entered 06/20 ent Page 60 of 65	0/16 12:52: 09	Desc Main	
16. What kind of debts do you have?	as "incurred by an individue No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily	business debts? Business ss or investment or through	family, or household a debts are debts the the operation of the	at you incurred to e business or	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availat No. Yes.	7. Go to line 18. To you estimate that after any exemple to distribute to unsecured creditors.	ot property is excluded an	d administrative expenses are	
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	 50	5,001-50,000 0,001-100,000 lore than 100,000	
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 r \$100,000,001-\$500	illion	500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion	
20. How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 mil \$10,000,001-\$50 m \$50,000,001-\$100 r \$100,000,001-\$500	sillion	500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion fore than \$50 billion	
Part 7: Sign Below					
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 1' or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 year or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Stanley Carter / 15/ Signature of Debtor 1	ulay D Carter *	Signature of Debtor 2		
- THE EAST CAN FAIR REPORT REPORTED FOR THE PROPERTY OF THE PR	Executed on 6/20/2016 MM / DD	O / Y Y Y Y Y SOUTH SEASON SEA	Executed on	MM / DD / YYYY WINDINGSTREWNI	

-		4 Day 1	00/00/10	20/16 12:52:09	Desc Main
Fill in this inform	nation to identify your case	- DOC	ument Paye 01 (ပ၊ ပ၁	
Debtor 1	Stanley		Carter		
	First Name	Middle Name	Last Name		
Debtor 2	\ 	1 aliable Minare	Last Name		
(Spouse, if filing	D First Name	Middle Name	Castillation		
United States B	ankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)					
	Form 106De	С		<u></u>	Check if this is ar amended filing
			ebtor's Schedu	les	12/15
If two married r	seonie are filing togethe	er, both are equally respon	sible for supplying correct in	iformation.	
Part 1: Sign		eone who is NOT an attorn	ey to help you fill out bankru	ptcy forms?	
No No					
	Name of person		Attach Bankruptcy P Signature (Official Fo	letition Preparer's Notice, Declar orm 119).	ation, and
that they /s/ Stanle	are true and correct.	re that I have read the sum	mary and schedules filed with X Signature	h this declaration and e of Debtor 2	
Date 6/20 MM	1/2016 1/DD/YYYY		Date M	M/DD/YYYY	

Det	tor 1	StanleyCast First Name	e 16-20064	Doc 1 File	ed 06/20/16		+06/20/16 12:52: 09 Desc Main	
					ocument	Page 62		
28.		hin 2 years be ditors, or othe		bankruptcy, did you	give a financial s	tatement to ar	yone about your business? Include all financial in	nstitutions,
	回	No						
	Ш	Yes. Fill in the	details below.		<u> 11</u> SERgata Africa	44.54.55.55.5		
					Date issued			
		Name			WIN DOM: CT			
		Number S	treet					
		NUMBER OF	4001					
		City	State	Zip Code	_			
		_ Ony	Otale	2,5 0000				
Par	t 12:	Sign Belo	w					
	and o	correct. I unde	erstand that makir an result in fines t	ng a false statement	t, concealing prop prisonment for up	erty, or obtain to 20 years, o	d I declare under penalty of perjury that the answeing money or property by fraud in connection with both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	ha
		9	Signature of Debtor	1			Signature of Debtor 2	
			J	,			Date	
		Ε	Date 6/20/2016					
	Did y	ou attach ado	ditional pages to	our Statement of F	inancial Affairs fo	r Individuals	Filing for Bankruptcy (Official Form 107)?	
		No						
	لـــا	Yes						
	Did y	ou pay or agr	ree to pay someon	e who is not an atto	rney to help you t	ill out bankru	otcy forms?	
	Ø	No						
	一·	Yes. Name of p	erson				Attach the Bankruptcy Petition Preparer's Notice,	
		•					Declaration, and Signature (Official Form 119).	

btor Stanicase 16-20064	Doc 1 Filed 06/20/16 Ente	ered 06/20/16/12/52:09 Desc Main
First Name	Middle Name Documeat Nameage	63 Otkhadan)
2: List Your Unexpired Per		
ormation below. Do not list real est	lease that you listed in Schedule G: Executory (tate leases. Unexpired leases are leases that are the trustee does not assume it. 11 U.S.C. § 365(Contracts and Unexpired Leases (Official Form 106G), fill in the still in effect; the lease period has not yet ended. You may assume o)(2).
Describe your unexpired persona	I property leases	Will the lease be assumed?
Lessor's name:		No Yes
Description of leased property:		
Lessor's name:		□ No □ Yes
Description of leased property:		
Lessor's name:		□ No □ Yes
Description of leased property:		
Lessor's name:		☐ No ☐ Yes
Description of leased property:		
Lessor's name;		No Yes
Description of leased property:		
Lessor's name:		No Yes
Description of leased property:		
Lessor's name:		No Yes
Description of leased property:		
3: Sign Below	gertrefte briggere green opgevoer rese, a geven geven en dy a og produkter, og en en glygna gen en en en en ged	operander angegept de montmet timb en faje sprit apre met e 👝 👝 👝 en en en englet e e e mondet en fort despet e a se font e e en

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

th	nat is subject to an unexpired lease.		
×	: 1s/ Stanley Carter Stanley D Carter	<i>></i> x	
	Signature of Debtor 1	Signature of Debtor 1	
	Date 6/20/2016	Date	
	MM/DD/YYYY	MM/DD/YYYY	

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In re:	Carter, Stanley	Case No	Case No.					
,	Debtor(s)		 -					
		Chapter.	Chapter7					
	VERIFICATION OF CREDITOR MATRIX							
Tł	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge							
Date:	6/20/2016	/s/ Carter, Stanley Carter, Stanley Signature of Debtor	Stanley D Catter					

Debtor 1 Stanley Case 16-20064 Dec 1 First Name	Filed 06/20116 Document	Page 65	H06/20/16 1 9665 A Debtor 1	Column B Debtor 2		
Unemployment compensation Do not enter the amount if you contend that the amount Social Security Act. Instead, list it here:	nt received was a benefit unc		\$0.00			
For you	\$0.00					
For your spouse	\$0.00					
Pension or retirement income. Do not include any a benefit under the Social Security Act.	***************************************		\$0.00			
10.Income from all other sources not listed above Do not include any benefits received under the Social received as a victim of a war crime, a crime against h domestic terrorism. If necessary, list other sources or total below.	Security Act or payments umanity, or international or					
Total amounts from separate pages, if any.			+\$0.00	+		
11. Calculate your total current monthly income. A column. Then add the total for Column A to the total	dd lines 2 through 10 for ead I for Column B.	ch	\$1,694,94	+		\$1,694.94 Total current
Part 2: Determine Whether the Means Test	Applies to You				1	monthly income
12. Calculate your current monthly income for the y						
12a. Copy your total current monthly income from line				Copy line 11 here -	- <u> </u>	\$1,694.94
Multiply by 12 (the number of months in a year).					·	X 12
12b. The result is your annual income for this part of	the form.				12b.	\$20,339.28
13 Calculate the median family income that applies		that we had don't				
Fill in the state in which you live.	Illinois 1					
Fill in the number of people in your household.	Suspension of the superior of				[
Fill in the median family income for your state and siz					13.	\$49,741,00
To find a list of applicable median income amounts, ginstructions for this form. This list may also be available.	to online using the link speci tile at the bankruptcy clerk's	ified in the sepa office.	rate			
14. How do the lines compare?						
14a. Line 12b is less than or equal to line 13. On Go to Part 3.	the top of page 1, check bo	x 1, There is no	presumption of abu	se.		
14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	page 1, check box 2, The pr	esumption of ab	use is determined t	y Form 122A-2.		
Part 3: Sign Below						wa
By signing here, I declare under penalty of perjury the	nat the information on this st	atement and in a	any attachments is	true and correct.		
Signature of Debtor 1	Carter	≭ Signatur	e of Debtor 2			
Date 6/20/2016 MM/DD/YYYY		Date 6/N	20/2016 M/DD/YYYY			
If you checked line 14a, do NOT fill out or file For If you checked line 14b, fill out Form 122A-2 and						